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Application Number	09/307443
Filing Date	May 10, 2000
First Named Inventor	Charles Ruelke
Art Unit	2817
Examiner Name	B. Lee
Attorney Docket Number	CM02872J (MOT03 P340)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 000,277

☒ Please change the correspondence address for the above-identified application to:

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Telephone		Email			

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Barbara R. Dautre</i>		
Name	<i>Barbara R. Dautre (39,505)</i>		
Date	<i>3/30/07</i>	Telephone	<i>954-723-3842</i>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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